

**UNIFORM APPLICATION FOR REGISTRATION OF INTERSTATE
MOTOR CARRIER OPERATIONS EXEMPT FROM REGULATION BY THE
FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION (FMCSA)**

TO: California Department of Motor Vehicles, SSRS Section, MS G875, P. O. Box 932370, Sacramento, CA 94232-3700
(916) 657-6636

APPLICATION

APPLICANT	CALIFORNIA EXEMPT ACCOUNT NUMBER/ICC NUMBER	DATE
TELEPHONE NUMBER	FAX NUMBER	
PRINCIPAL PLACE OF BUSINESS ADDRESS: (STREET)	CITY	STATE ZIP
MAILING ADDRESS, IF DIFFERENT THAN ABOVE: (STREET)	CITY	STATE ZIP

TYPE OF REGISTRATION

- ☐ **New Carrier Registration** - The motor carrier has not previously registered.
☐ **Annual Registration** - The motor carrier is renewing its annual registration.
☐ **Supplemental Registration** - The motor carrier is adding additional vehicles or states of travel **after** its annual registration.
 Show type below:

☐ **New States of Travel** ☐ **Vehicles to Existing States of Travel** ☐ **States and Vehicles**

The vehicle or vehicles which the applicant intends to operate or driveaway operations which it intends to conduct, within the borders of the State, are exempt from regulation by the FMCSA, pursuant to the authority checked below:

- | | |
|---|--|
| <input type="checkbox"/> Sec. 13503 (Terminal Area Exemption) | <input type="checkbox"/> Sec. 13506(a)(8) (Air Transport Exemption) |
| <input type="checkbox"/> Sec. 13505(a) (Primary Business Exemption) | <input type="checkbox"/> Sec. 13506(a)(9) (National Park Exemption) |
| <input type="checkbox"/> Sec. 13505(b) (Compensated Intercompany Hauling) | <input type="checkbox"/> Sec. 13506(a)(10) (Commute Exemption) |
| <input type="checkbox"/> Sec. 13506(a)(1) (School Bus Exemption) | <input type="checkbox"/> Sec. 13506(a)(11) (Pallet Exemption) |
| <input type="checkbox"/> Sec. 13506(a)(2) (Taxicab Exemption) | <input type="checkbox"/> Sec. 13506(a)(12) (Decorative Rock Exemption) |
| <input type="checkbox"/> Sec. 13506(a)(3) (Hotel Exemption) | <input type="checkbox"/> Sec. 13506(a)(13) (Wood Chip Exemption) |
| <input type="checkbox"/> Sec. 13506(a)(4) (Farm Exemption) | <input type="checkbox"/> Sec. 13506(a)(14) (Crushed Glass Exemption) |
| <input type="checkbox"/> Sec. 13506(a)(5) (Farm Cooperative Exemption) | <input type="checkbox"/> Sec. 13506(b)(1) (Municipal Exemption) |
| <input type="checkbox"/> Sec. 13506(a)(6) (Commodities Exemption) | <input type="checkbox"/> Sec. 13506(b)(2) (Occasional Exemption) |
| <input type="checkbox"/> Sec. 13506(a)(7) (Newspaper Exemption) | <input type="checkbox"/> Sec. 13506(b)(3) (Emergency Tow Exemption) |
| | <input type="checkbox"/> Sec. _____ (Specify Other Exemption) |

Type of Carrier: ☐ Property ☐ Passenger ☐ Common ☐ Contract ☐ Household Goods

TYPE OF MOTOR CARRIER

IF INDIVIDUAL, GIVE NAME AND ADDRESS:

IF PARTNERSHIP, GIVE NAMES AND ADDRESSES OF PARTNERS:

IF CORPORATION, GIVE STATE IN WHICH INCORPORATED:

NAME OF PRESIDENT

NAME OF SECRETARY

PROCESS AGENT FOR STATE OF CALIFORNIA: (NAME)

STREET

CITY

STATE

ZIP

California

CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that the information I have provided is true and correct.

SIGNATURE

TITLE